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CRITICAL EVALUATION OF ACTION OF BALA VILVA GHRUTA IN MIGRAINE (VATAJA SHIRASTAPA)

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ABSTRACT

Migraine is one of the most common disorders which can make one socially handicapped. Migraine is one among the causes that can bring disability in common man. It is characterized by paroxysmal episodes of unilateral or bilateral headache associated with nausea, vomiting, photophobia and phonophobia. Though migraine treatments and preventive strategies have greatly improved, there is enormous gap between the treatment that is available and the treatment that is delivered for migraine. Therefore, a better understanding of migraine and the development of better therapeutic alternatives are required. Ayurveda postulates unique treatment modalities for the management of *Shirorogas*. In Ashtanga Hrudaya, the symptoms of migraine can be found under *Vataja Shirastapa Lakshanas* such as pricking pain on the sides of the forehead, *Prakashaasahata* etc. As there is main involvement of *Vata*, the line of treatment is *Vatashamana* and *Ghruta* is one among them for *Urdhvajatrugata Vikaras*. *Bala Vilva Ghruta* is having the qualities like *Vatahara* and *Brumhana*, it can be a good option for the management of *Vataja Shirastapa*.

Keywords: Migraine, Vataja Shirastapa, Bala Vilva Ghruta, Nasapana

INTRODUCTION

Migraine headache is defined as the pain occurring on either one or both sides of the head that is throbbing or pulsating in nature. It is the second most common cause of headache, afflicts approximately 15% of women and 6% of men over a period of one year¹. The features of Migraine can be found under *Vataja Shi*-

rastapa Lakshana² by Ashtanga Hrudaya. As Vata is mainly involved in the Samprapti of this disease, the drugs having Vatahara and Bruhmana properties are the ideal choice for Vataja Shirastapa treatment and Bala Vilva Ghruta³ has the same qualities. So, there is a very need to understand the scope of external and

internal usage of *Bala Vilva Ghruta* in the treatment of *Vataja Shirastapa*.

Disease Review

Migraine is usually an episodic headache associated with certain features such as sensitivity to light, sound, or movement; nausea and vomiting often accompany the headache. A useful description of migraine is a benign and recurring syndrome of headache associated with other symptoms of neurological dysfunction in varying admixtures. Migraine can often be recognized by its activators, referred to as triggers¹. The International Headache Society (IHS) criteria for migraine include moderate to severe headache, pulsating quality, and unilateral location, aggravation by walking stairs or similar routine activity, attendant nausea and or vomiting, photophobia, phonophobia and multiple attacks each lasting 4 to 72 hours.

Some believe that migraine is a neurovascular disorder caused by brain. Other theories include the idea that there are metabolic disturbances or an abnormal release of neurochemicals in the brain, like serotonin and noradrenalin or high levels of such substances as ammonia, histamine, etc. being released into the blood⁴. Activation of cells in the trigeminal nucleus results in the release of vasoactive neuropeptides, particularly calcitonin gene- related peptide (CGRP), at vascular terminations of the trigeminal nerve and within the trigeminal nucleus. Data also support a role for dopamine in the pathophysiology of migraine. Most migraine symptoms can be induced by dopaminergic stimulation. Moreover, there is dopamine receptor hypersensitivity in migraineurs, as demonstrated by the induction of yawning, nausea, vomiting, hypotension, and other symptoms of a migraine attack by dopaminergic agonists at doses that do not affect nonmigraineurs⁵.

By loud and excessive speech, pungent drinks, vigil, contact with cold wind, excessive sexual indulgence,

suppression of natural urges, excessive fasting, trauma, excessive purgation and vomiting, excessive weeping, grief, carrying heavy load, walking for long distance and emaciation in excess, Vata gets aggravated and having entered the vessels of the head, it gets further vitiated to cause excruciating pain in the head⁶. By aggravation of *Vata*, symptoms such as severe pricking pain in the two temples, feeling of severe pain as though the *Ghata* (area above the temples) gets open, the centre of the brows and forehead fall out; ears are painful and have noise in them; eyes feel as though being plucked out, the head reels and feels loose in all its joints, there is severe pulsations in the network of blood vessels, rigidity of the lower jaw and the shoulders, intolerance to light, running in the nose, relief of pain without any reason occasionally and reduction in its severity by massaging, anointing with oil and fomentation. Vataja Shirastapa⁷ mentioned by Vagbhata also has similar features of migraine.

For *Vataja Shiroroga*, oleation, fomentation and inhalation therapies, and *Vata* alleviating drinks, food and hot poultices are indicated⁸. In headache produced by *Vata*, treatments indicated for *Vata Vyadhis* should be done; milk, ghee or oil should be used as after-drink. Internal medicine like drinking milk after consuming *Ghruta* or *Taila* is also indicated as general treatment. Even though there are different treatment modalities mentioned, *Snehana* has a major role in combating *Vata Dosha* and *Snehana* causes *Tarpana* and thereby *Marma Paripalana*. This *Snehana* can be done externally or internally.

Bala Vilva Ghruta: Bala and Vilva are boiled in milk and the scum of ghee is added to it and cooked again. This ghee used as *Nasya* in doses of either one *Shukti* or one *Prakunca* is ideal for diseases of *Vata* affecting the head.

Table 1:

Drug	Rasa	Guna	Veerya	Vipaka	Karma
Balamoola	Tikta, Madhura	Snigdha, Laghu, Picchila	Sheeta	Madhura	Vatapittahara, Balya, Bruhmana
Vilvamoola	Madhura	Laghu, Ruksha	Ushna	Madhura	Tridoshahara, Grahi, Deepana, Pachana
Ghruta Manda	Madhura	Ruksha, Teekshna, Tanu (compared to Ghruta)	Sheeta	Madhura	Vatapittahara, Balya, Chakshushya
Goksheera	Madhura	Snigdha, Guru	Sheeta	Madhura	Vatapittahara, Jeevaneeya, Rasayana

DISCUSSION

Shiras is considered as *Uttamanga* as it is the seat of *Prana Vata*, *Tarpaka Kapha*, *Alochaka Pitta* and all *Indriyas*. In addition to that it is also considered as one among the *Trimarmas*. Therefore, proper diagnosis, emergency attention and treatment are needed to protect the healthy condition of the *Shiras*.

The involvement of Vata is the main culprit in Vataja Shirastapa and so the controlling of Vata contributes the major part in the treatment. By the analysis (Table 1), we can understand that Balamoola is having Vatahara action due to its Madhura Rasa, Snigdha Guna, and Madhura Vipaka. It is also having Karmas like Balya and Bruhmana. Vilvamoola is Vatahara due to its Madhura rasa, Ushna Veerya and Madhura Vipaka. According to Bruhatrayee, Goksheera and Ghruta act as Vatapittahara. According to Sushruta Samhita, Ghruta Manda⁹ is specifically indicated in Shirashoola. As per the reference of Ashtanga Samgraha, Ghruta Manda is having more Ruksha Teekshna Guna than that of Ghruta and this Teekshnata might have been one of the causes for its increased potency. Ghruta preparation has a specific effect in Tarpana and Shiromarma Paripalana as it is having the capacity to cross the blood-brain barrier.

By considering all these factors, we can assume that *Bala Vilva Ghruta* mainly acts against the *Rooksha Chala Laghu Guna Vruddi* of *Vata* and thereby very beneficial in the alleviation of *Vataja Shirastapa*.

Earlier scientific studies proved that *Sida cordifolia* can increase pain tolerance and appears to have antiinflammatory and antioxidant properties. The highest antioxidant activity was observed in the root extract. Free radicals have been extensively reported to be implicated in neurodegenerative diseases. Verification of the antioxidant capacity of *Sida cordifolia* may justify its indication for treatment of neurodegenerative diseases in the traditional medicine. *Sida cordifolia* contain small quantities of both ephedrine and it is known to stimulate the central nervous system. The existence of a potent bronchodilator- vasicinone in *Sida cordifolia* may also justify its therapeutic utility in the Ayurvedic system of medicine for conditions like those treated with ephedrine¹⁰.

Pharmacological studies proved that the radioprotective action of the extract of *A. marmelos* might be due to free radical scavenging and arrest of lipid peroxidation accompanied by an elevation in glutathione concentration. Its analgesic property might be one of the reasons for effectiveness in migraine¹¹.

Cow ghee can bond with lipid soluble nutrients and herbs to penetrate the lipid-based cell walls of the body. Thus, it increases the potency of certain herbs by carrying the active components to the interior of the cells. It contains antioxidants like Vitamin E and beta carotene besides other nutrients like phospholipids, diglycerides and triglycerides. The antioxidant properties of ghee help to prevent the damages of nervous and brain tissues besides retarding the progress of degenerative diseases¹².

By considering all these pharmacological properties of different ingredients of *Bala Vilva Ghruta*, we can understand the counteracting effect on pathophysiology of migraine if it is administered as *Pana. Nasya* may be the better mode of administration as *Nasa* is the doorway to the *Shiras*. The combination of *Nasya* and *Pana* in the form of *Nasapana*¹³ may be much more beneficial in migraine since it can multiply the effect by absorbing via nasal mucosa as well as gut.

CONCLUSION

Various forms of *Snehana* are the treatment of choice in *Vataja Shirastapa* as explained by our *Acharyas*. *Bala Vilva Ghruta* plays a major role in *Samprapti Vighatana* of *Vataja Shirastapa*. A slight modification in internal usage in the form of *Nasapana* can give combined effect of *Nasya* as well as *Pana* and may be more beneficial in migraine.

Suggestion: A clinical trial on this *Yoga* will be a great contribution to the society and different modes of administration like *Nasapana* can also be tried to find whether effectiveness of the *Yoga* is increased.

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